

School Medicaid Advisory Committee (SMAC) Charter

I. Name and Purpose

The Oregon Department of Education (ODE) and Oregon Health Authority (OHA) recognize that School Medicaid billing provides an important opportunity for reimbursement to school districts and Early Intervention/Early Childhood Special Education (EI/ECSE) programs for eligible health services that they provide to students. Efficient and effective school Medicaid billing requires systems and policies aligned with education, health, and Medicaid regulations and requirements. The ODE and the OHA commit to an ongoing School Medicaid Advisory Committee (SMAC) that meets at least quarterly to collaborate on enhancing the School Medicaid program and recommend changes within the scope of applicable state and federal rules and regulations.

The School Medicaid Advisory Committee will serve as an informal advisory body that will review and analyze federal rules and regulations, state statute and rule, Oregon's State Plan Amendment, and other state School Medicaid programs with the goals of:

1. Maximizing School Medicaid billing in Oregon
2. Removing barriers to participation
3. Developing and updating training and resources
4. Increasing the number of participating school districts
5. Continuous program improvement

II. Composition

The ODE and OHA will facilitate and guide discussion for the School Medicaid Advisory Committee (SMAC). ODE and OHA will appoint members of the SMAC from among School Medicaid professionals, school health professionals, education administrators, parent representatives, advocacy groups, and other individuals that may bring expertise on policy and funding related to School Medicaid and school health issues. The term of membership on the School Medicaid Advisory Committee will be 1 year and may be extended at the discretion of ODE and OHA. The School Medicaid Advisory Committee will consist of up to 20 members (not including ODE/OHA staff) who represent a variety of perspectives, including but not limited to:

- ODE (co-lead)
- OHA (co-lead)
- School Health Practitioners
- Advocacy Groups (COSA, OASBO, FACT, OSBA, etc.)
- Parent(s) of a Student(s) with a Section 504 Plan, Individualized Education Program, or Individualized Family Service Plan
- School District Administrators
- EI/ECSE Program Staff/Administrators
- Education Service District (ESD) Administrators
- School Medicaid Program Experts

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III. Responsibilities

Review and Analysis: The School Medicaid Advisory Committee will serve as an informal advisory body that will review and analyze federal rules and regulations, state statute and rule, Oregon's Medicaid State Plan, and other state School Medicaid programs.

Recommendations: Recommendations will be made using a majority vote system to ensure that a clear expression of the Committee's position can be documented and conveyed. ODE and OHA will take discussions, recommendations, and other available information into consideration when making a decision. All recommendations made by the committee will be documented in meeting minutes. This documentation will clearly outline the position taken by the Committee, including any points of disagreement within the Committee, or with ODE and/or OHA. Committee members will be provided with meeting minutes for review to ensure that the collective voice of the Committee is accurately represented. Based on the review, the School Medicaid Advisory Committee will provide recommendations to the ODE and OHA regarding updates to existing rule, policy, and/or resources. ODE and OHA will then determine how to proceed.

Engagement: The School Medicaid Advisory Committee will also provide ODE and OHA representatives with information and recommendations for engagement by one or both agencies.

In addition to school districts, ESDs, and EI/ECSE programs, potential engagement includes, but is not limited to, state licensing boards (nursing, physical therapy, occupational therapy, etc.), other State Education Agencies and State Medicaid Agencies, the National Alliance for Medicaid in Education (NAME), the School Nurse Advisory Group (SNAG), State Advisory Council for Special Education (SACSE), State Interagency Coordinating Council (SICC), the Teachers Standards and Practices Commission (TSPC), and providers of youth and family behavioral and mental health.

Awareness: The School Medicaid Advisory Committee will work to improve and align messaging and understanding of Medicaid policies and procedures among legislators, school administrators, parents, educators, and other partners to support increased participation in School Medicaid billing.

IV. Meetings

The School Medicaid Advisory Committee will meet at least quarterly. The duration of the meetings is three hours. All School Medicaid Advisory Committee meetings will occur virtually.

Facilitation responsibilities will be shared between designated representatives from ODE and OHA. Representatives from ODE and OHA will collaborate closely to ensure

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effective communication and coordination. Regular check-ins, pre-meeting planning sessions, and debriefs will be conducted to share insights, discuss challenges, and strategize for continuous improvement.

The facilitators will be responsible for guiding discussions, ensuring all voices are heard, and maintaining a constructive and inclusive atmosphere during meetings. Facilitators will also be responsible for drafting agendas, tracking action items, ensuring notes are taken, and that notes are shared with the group.

The School Medicaid Advisory Committee is co-lead by representatives from ODE and OHA. In the event that there is a disagreement, ODE and OHA will take the discussion and other available information under consideration and make a decision.

V. Communication and Advocacy

Communication on Behalf of the Committee

Communication made on behalf of the Committee reflects the collective views of the members and must be agreed upon by consensus and approved by ODE and OHA. Consensus is defined as general agreement where all members either actively support the decision or agree not to oppose it. The following rules apply:

Authorized Spokesperson

ODE and OHA will designate a spokesperson (or co-spokespersons, if agreed) if needed. The spokesperson(s) will be responsible for delivering the Committee's collective communication to external parties. The spokesperson must strictly adhere to the consensus-based message, and under no circumstances should personal views be presented as the Committee's position.

Transparency and Accountability

Once a consensus communication is delivered, the Committee should maintain transparency by archiving and sharing relevant materials (meeting minutes, decision summaries, public statements) with all members to ensure alignment.

Advocacy as an Independent Person

Members of the School Medicaid Advisory Committee retain the right to engage in advocacy as independent individuals. However, such advocacy must be clearly distinguished from any communication on behalf of the Committee.

Individual Advocacy

Members are free to advocate for personal views or positions, even if these differ from the Committee's collective stance. When advocating independently, members must explicitly clarify that they are speaking in a personal capacity and not on behalf of the

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Committee. Members should not leverage their relationship with the Committee and/or ODE/OHA to influence decisions or actions.

Avoiding Confusion

Any public communication that could be perceived as related to Committee matters (due to the member's association with the Committee) should include a disclaimer such as: "These views are my own and do not represent the position of the School Medicaid Advisory Committee."

Members should avoid using their affiliation with the Committee to advance personal advocacy positions that may create conflicts of interest or mislead stakeholders. If a member's personal advocacy overlaps significantly with the Committee's work, the Committee should be notified to ensure clear boundaries are maintained.

Dispute Resolution

If a member's personal advocacy efforts are perceived to conflict with the Committee's collective communication or cause confusion among external parties, the Committee will follow these steps to resolve the matter:

- Any concerns regarding potential conflicts between individual advocacy and Committee communication should be raised to an ODE representative. ODE and OHA representatives will work collaboratively to ensure that boundaries between individual and Committee positions are respected.
- In the event of a violation of this protocol, ODE and OHA representatives will address the protocol with the individual.

VI. Duration

The School Medicaid Advisory Committee shall operate indefinitely, with periodic reviews to ensure continuous improvement and effectiveness.